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U.S. Patent and Tradent Affice; U.S. Debart Affice; U.S. Debart Chief, U.S.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/782,745			ing Date 19/2004	To be Mailed
	Al	PPLICATION A	ENTITY 🛛	OR		HER THAN					
Н	FOR		(Column 1) NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A		N/A	ı	N/A		1	N/A	.,,
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A		1	N/A	
TO'	CFR 1.16(i))		minus 20 =				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *				x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheer is \$29 additi 35 U.	ts of pape 50 (\$125 ional 50 s S.C. 41(er, the applica for small entit sheets or fracti a)(1)(G) and 3	ings exceed 100 tion size fee due y) for each ion thereof. See 7 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										Ь	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	07/07/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 52	Minus	 52	= 0		X \$26 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 7	Minus	···7	= 0		X \$110 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		-		x \$ =		OR	x s =	
Ω	Independent (37 CFR 1,16(h))	*	Minus	*	-		x \$ =		OR	x \$ =	
핍	Application Size Fee (37 CFR 1.16(s))										
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
* 16	* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.								OR	TOTAL ADD'L FEE	
If the entry an column 1 is less than the entry in column 2, write "0" in column 2. The "1 in the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 30, enter "30". "Example 1 in the "Highest Number Previously Paid For" (Tail or in dependently) is the highest number found in the appropriate box in column 1.											

This collection of information is orquired by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is life (and by the USPTO to process) an application Confidentiality is operand by 38 US 6.2 22 and 37 CFR 1.4. 1 this collection is estimated to the bet 2 minutes to complete, encluding pathenapy, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.